PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10603945

CLAIMS AS FILED - PART I							SN	SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		TY	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			18				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/8 minus 20=		* 7)			X\$ 9=	-	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 5			X42≈		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in					"0" in c	column 2		OTAL		OR	TOTAL	758
CLAIMS AS AMENDED - PART II											OTHER	
(Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	A STATE OF THE STA	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	i
	Independent	* NTATION OF MI	Minus	***	CLAIN	=		X42=		OR	X84=	
	FINOT PRESE	INTATION OF IVI	JETTPLE DEF	ENDENT	CLAIIVI			+140=		OR	+280=	
							<u> </u>	TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DIT. FEE		JO!!	ADDIT. FEE	
\blacksquare		(Column 1) CLAIMS		HIGH		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	,	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	;	X\$ 9=	i	OR	X\$18≈	
	Independent	* NTATION OF MI	Minus	***	CLAIM	=		X42=		OR	X84=	
L	FINOT FNESE	INTATION OF IVI	JUNIPLE DEF	ENDENI	CLAIIVI			·140=		OR	+280≈	i
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	AUI	J11. 1 LL -		•	ADD11.1 CE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	 	(\$ 9=	- '	OR	X\$18=	
	Independent	*	Minus	***		=	—	X42=			X84≈	
lacksquare	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		<u> </u>	A42=		OR	784≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280≃	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					found	in the ann	ropriate box	cin col	umn 1	